

the cold-bloodedness of it all, waiting for him to hurt you.

That's the real muscle retraction, no mistaking it. Deep layer and peritoneum next, but first, of course, he'll fiddle around, tying off and so forth. Ouch! That one hurt, whatever it was.

Funny how I'm feeling now. No particular pain, but every last fiber of me seems aware that something unusual and alarming is happening to me, and is more than a little worried about it—

"Do you know where I am now?"

"Nope, lost track altogether." He must be in the belly somewhere, but you can't prove it by me. There are no particular conscious sensations, except that they are working somewhere in my appendical area, but I'm tense all over. Not the muscles; they seem relaxed enough. Its a sort of general somatic anxiety, about something desperate and dangerous going on inside me; something like a building with all the burglar and fire alarms going full tilt, all through it, but the bells ringing silently. It's hard to explain; consciously, I know what is going on, in a general sort of way, and also I am aware that my unconsciousness, or subconsciousness, is full of feelings, which are probably unpleasant. Hope they don't burst through into my consciousness; would hate to have my nerve give out and disgrace me.

"Now just a moment. I want to see exactly how things lie in here."

Oh, damn his scientific soul! "Take your time; I'm all right." Try to be a good guinea-pig, since I must be one. Ugh, he must be pestivating around inside, dragging on things. No pain, but that general sensation of nervous discharges throughout the body is getting stronger and stronger; if it were electricity, I'd prickle all over.

Ow, that hurt! In the umbilicus. Felt exactly as if he were hauling on the falciform ligament, trying to drag my navel into the belly by its roots. But the falciform ligament goes to the liver somewhere doesn't it? There's some hurting in the general appendical region, too.

"Having an attack now?"

"Absolutely—and it hurts." An attack is just exactly what it is, and it would be eased a lot if I could only pass the gas.

"Well, I guess our diagnosis was right."

Oh, damn your diagnosis, and you too! Get along, man, and get done! My nerve is going to give out in a minute—

"If you'd just give me—a little—rest." Hell, if I can't talk straight, better shut up!

"Sure, we'll give you a rest."

Gosh, ain't it a grand and a glorious feeling! Just about here is where that fellow who tried to take out his own appendix must have had to quit. Have a notion I could have gotten down through the peritoneum, if I'd had to, but no further. Think of the technical difficulties of locating the thing, lying on your back like this; especially if it were buried somewhere. There they go again, hauling on the mesentery or something—it hurts! Don't believe anybody could haul on his own like that—hurts too much—leastways, I couldn't—it's hurting more and more, real sensible pain, and I don't believe I can stand much more—

"Ugrh-rrh!" There, damn it, I knew my nerve would go! I'm feeling queer—sort of floating—things getting distant—this must be what shock feels like, a sort of refuge from too much pain. But my nerve isn't going to give out, thank God, for now I know that I know how to faint, if need be. They're still pulling on that mesentery, but not so hard, and it doesn't seem to be hurting so much; the purse-string, perhaps? Dick said he thought they had dropped the cautery into his belly, when they divided the appendix, and cauterized the stump; nothing like that, so far—though it wouldn't matter now—

Things seem to refocus themselves, rather suddenly. I don't believe I fainted, but I wasn't far from it; just began to, perhaps.

"Now I'm going to sew up the peritoneum. The anatomists say there are no pain nerves in it. How about that?"

"They—ugh—lie!" Let the damn fool laugh! Visceral, perhaps not, but parietal—ugh—it hurts! Unless he's fooling me about where he is?

"Now we'll take the superficial layer of the muscle sheath. It's supposed to have nerves."

It has, too. I feel every prick on both sides of the infiltrated area. If that area were wider—but, pshaw, a fellow can stand this easily. Ugh, that one hurt! "What was that?"

"The muscle-tie."

Good, he's nearly through. Skin next. Yes, every prick hurts; and then he has to fool with the skin edges—hope he gets 'em right; I was always fussy about 'em. Now the dressings—

"Say, would you mind letting me see the thing?" Someone brings around a little bottle; the thing is in it, but the eyes won't focus right, somehow; best slide back, and let the morph take hold now—it's rather like a dream, till we get back into bed, and relax into a doze—

"AS OTHERS SEE US"

CHESTER ROWELL'S COMMENT *

The Los Angeles *Times* takes Dr. Morris Fishbein, editor of the *Journal of the American Medical Association*, to task for "arrogant intolerance" in claiming a monopoly of "one limited school" of medicine, and for "branding all indiscriminately as quacks, faddists, fakers, and impostors who do not subscribe to his narrow views of what constitutes the practice of healing." "Medical diagnosis under the canons of the regular school is not such an exact science as to call for sneering reference to the substitution of the violet rays of the sun for the old-time allopathic drug dopping in the treatment of tuberculosis."

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Since there is not, and never was, any such thing as "old-time allopathic drug dopping in the treatment of tuberculosis," and since Doctor Fishbein made no "sneering reference" to the use of sunlight in its treatment, but, on the contrary, uses that treatment himself, as do all other scientific physicians, the illustration is, to say the least, unfortunate.

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But the appeal for "tolerance," by one "school" of another, is an example of a common fallacy. There is no "tolerance" of astrology by astronomers. There is no "tolerance" of fortune-telling by psychologists, nor of perpetual motion inventors by physicists. Geologists do not locate oil or water by dowsing with a forked stick, nor "tolerate" those who do. Entomologists do not "tolerate" those who would exterminate insect pests by interfering with their spontaneous generation. Scientific agriculture does not "tolerate" the theory that potatoes grow wrong unless planted in the dark of the moon. All these "schools" exist, and they are all rejected outright as unscientific superstitions by every scientist in the world.

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On the other hand, good Catholics tolerate the Holy Rollers, and Buddhists tolerate the Mormons. Atheists tolerate the faith of Christians and Christians the unfaith of atheists. Protestants and Christian Scientists tolerate each other's religion, each respecting the right of the other to seek God in his own way. But the law of the land did not tolerate polygamy, when the Mormons said it was religion, and the regents of the University of California do not permit

* This article appeared in the opening column of the second section of the San Francisco Chronicle of Saturday, January 18, 1930. See second editorial, this issue.

an antivaccinationist student to endanger the health of other students, even though he calls his objection religious.

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So in medicine. If it were a matter of faith, dogma or canons, one "school" should "tolerate" another. If it is a matter of science, then the only distinction is that of scientific and unscientific. And between science and non-science there is no equality of right, and no basis for tolerance. The fact that millions of devout people in India believe in casting their horoscopes by the stars does not erect them into a "school" of astronomy, nor impose on astronomy any obligation to recognize them. They are neither "regular" nor "irregular" astronomers—they are not astronomers at all. Neither is any unscientific theory or practice of healing any part of the science of medicine. There are only two sorts of medicine, scientific and unscientific. And of the unscientific "schools," science has only this to say—that they are unscientific.

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How, then, shall we distinguish which principles and practices of healing are scientific, and which are not? The simplest test is that which we unhesitatingly apply in every other branch of knowledge. That is the judgment of scientists. If the scientists say that a certain thing is scientific, we accept it as such. If they all say it is unscientific, we say likewise, at least until it has succeeded in convincing them. Every scientific university in the world teaches astronomy, and not one teaches astrology. All of them teach chemistry and not one teaches alchemy. Every university in the world teaches scientific medicine, and not one of them—not a single one in the whole world—teaches or recognizes any of the "schools" or sects for which the *Times* speaks. If the unanimous voice of science means anything, this is its verdict.

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The next test, and the decisive one, is that of method. Scientists may be mistaken, sometimes, in their results and conclusions. Sometimes a thing which seems true in the light of incomplete information becomes only partly true in the light of later discoveries. But science is not mistaken in its method. That method is systematic observation and experiment, and the submission of these observations and experiments to the scientists of the world, for them to repeat, to test and to scrutinize. Whatever pursues that method and is approved by that test is scientific—including, in medicine, light rays for tuberculosis, diet for many ailments, and hydrotherapy for certain mental conditions. Whatever does not proceed by that method, or fails by that test, is unscientific—including all the cults, sects, and schools which Doctor Fishbein rejects and the *Times* defends.

TWENTY-FIVE YEARS AGO*

EXCERPTS FROM OUR STATE MEDICAL JOURNAL

Vol. III, No. 2, February 1905

From some editorial notes:

... *The Meeting at Riverside*.—The next annual meeting of the state society will be held on April 18, 19 and 20, at the New Glenwood Hotel, Riverside. . . .

... *Some Bad Legislation*.—Two particularly objectionable bills have been introduced, one in the Senate and the other in the Assembly. . . .

... Don't lose an hour's time in writing to the Senator and Assemblyman from your district, and get every voter you can to do the same thing; tell them to leave these two laws alone—the vaccination law and the Medical Practice Act. If these two bills

* This column aims to mirror the work and aims of colleagues who bore the brunt of state society work some twenty-five years ago. It is hoped that such presentation will be of interest to both old and recent members.

are allowed to become laws, the scourge of smallpox and the pestilence of the quack will soon be California's portion. . . .

From an article on "*The Tonsils as Portals of Infection*" by M. W. Fredrick, M. D., San Francisco:

Although it is scarcely fifteen years since Gabbi called attention to the frequent association of tonsillitis and pneumonia, the importance of the part played by the tonsils as portals of infection for diseases in distant parts of the body is so great, and the idea such a plausible one, that the subject speedily gained recognition, and has been ably expounded in its different phases by a number of good writers and observers. . . .

From an article entitled "*Report of Cases Simulating Grave Mastoiditis*" by Fred Baker, M. D., San Diego:

Strange or rare conditions involving difficulties of diagnosis in diseases which endanger life or the integrity of important function are always worth reporting. The following case fulfills these conditions, while the succeeding cases, though less interesting and important, illustrate another phase of the same disease: . . .

From an article on "*Posture in the Treatment of Disease*" by C. M. Cooper, M. B.:

The influence of disease upon attitude and position in obedience to the principles enunciated particularly by Hilton has been studied to some extent; though even in this there is still much that could be added to our knowledge if to the improved armamentarium of our day could be added the discerning bedside acumen of the older clinicians. . . .

From minutes of county medical societies:

... *Los Angeles County*.—The resolutions passed by the Council and officers of the state society, in conference, relating to the question of advertising in the *Journal of the American Medical Association*, were then read by the secretary and, after some little discussion, endorsed with but one dissenting vote. . . .

... *San Mateo County*.—In response to an invitation sent out by the secretary of the state society a number of physicians of San Mateo County met at the Union Hotel in San Mateo on the evening of December 22, and effected organization of the San Mateo County Medical Society. . . .

From the minutes of the California Academy of Medicine:

Regular meeting held in San Francisco, December 27, 1904, the president, Dr. Dudley Tait, being in the chair. . . .

... "An Epidemic of Diphtheria at Stanford University." Dr. R. L. Wilbur reported his personal experience in the recent small epidemic of diphtheria at Stanford University and Palo Alto. The origin of the epidemic could not be definitely traced. Of the forty-three cases which came under his observation, in four the infection involved the larynx, in three the mouth, in one the nose, and in one the conjunctiva. . . .

From a reprint of an editorial:

New Jersey's Approval.—Doctor Jones, editor of the *California State Journal of Medicine*, instead of receiving the support and encouragement (in regard to advertising of secret remedies in medical journals), which his manly and unselfish course deserves, seems to get abuse from some, misrepresentation from others, and the cold shoulder from all. . . .

... One would think that no medical man, except Doctor Jones, was ever born with a sense of humor; otherwise, rich and powerful medical societies would not make themselves ridiculous and stultify themselves for gain. . . .

... What folly! What hypocrisy! Like the Pharisees of old, they make tithe of mint and cummin and neglect the weightier matters of the law.—*Journal of the Medical Society of New Jersey*.